

# Weekly E-mail Update

WASHINGTON STATE 12TH LEGISLATIVE DISTRICT



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Committees: Labor, Commerce, Research & Development, ranking Republican; Health & Long-Term Care; Ways & Means; Rules

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July 18, 2006

Dear Friends,

I hope your summer has gone well so far. Unfortunately, many fruit growers in the Upper Wenatchee Valley and Manson aren't doing well as a result of the disastrous hail storm that struck these areas on July 5th. The storm caused growers to lose a large part of what is considered to be the world's best pear crop. Manson apple growers lost up to 75 percent of their crop, and a significant portion of the cherry crop in the Manson area was damaged as well. Fruit growers aren't the only ones hurt by the storm. Fruit storage facilities will be negatively impacted since there will be less fruit to keep in cold storage.

Gov. Gregoire today asked United States Secretary of Agriculture Mike Johanns to designate five Eastern Washington counties – Adams, Chelan, Douglas, Lincoln and Okanogan – as farm disaster areas, making farmers eligible for emergency low-interest loans. The counties experienced significant crop losses due to severe weather on July 4-6. The declaration could provide emergency low-interest USDA Farm Service Agency loans to cover production and farm property losses to farmers in the five counties plus adjoining counties.

I'll continue to closely monitor this situation. As your state senator, as well as an orchardist, I hope a quick and meaningful solution can be found for those who were affected by this month's crop losses.

## **KPQ interview with Rhona Barron on July 19th**

I'll join Rhona Barron for an interview on KPQ (AM 560) tomorrow at 3 p.m. We did a similar interview last month. If you have time, I hope you can tune in.

## **Guest editorial: Health care reform calls for bold, creative solutions**

*Last month, the Wenatchee World and Seattle P-I ran guest editorial pieces that I wrote on health care reform. Below is the piece that ran in the Wenatchee World. Please let me know if you have any comments or questions regarding it.*

During the 2006 session, the Legislature passed a bill creating a commission to study health care in Washington. By Dec. 1, 2006, the commission must submit a 5-year plan

for improving access to affordable care for all citizens. This week my fellow commission members and I hold our first meeting.

Answering the question, “Where we are now and what do we want our health care system to look like in 5 years?” is monumental. We can do it, however, by keeping several goals in mind:

- First, the commission has not been asked to reinvent the wheel, nor should we. While this commission is new, the health care discussion is not.

For example, in 2003 the Washington Health Foundation sponsored a Leadership Summit that resulted in a 10-point resolution, signed by nearly all participants. Bottom line, we agreed that more money is not the answer, but rather we should redesign the health system and re-allocate existing resources.

Previous discussions like this one and those occurring during the interim health care task force meetings can and should aid our current work, making sure we don’t create health care policy in a vacuum. We cannot create sound health care policy without knowing where we came from, and where we want to go.

Likewise, our desire to “do something” shouldn’t blind us to existing policies and programs. As we consider new ideas, we must thoroughly understand existing programs and policies, the rationale behind them, and how well they have achieved their intended result.

- Second, we must define the roles of government, insurance companies and the individual in our health care delivery system. Defining what insurance means and whether we will focus on government or private marketplace solutions will frame our entire debate.

To accomplish this, we’ve asked groups representing health, labor, business, and consumer groups to come to us with health care solution ideas. Their perspective will be invaluable.

- Third, criteria used to evaluate these new ideas will set the tone for our entire endeavor. From where I stand as both a pharmacist and a legislator who works on health care issues, it is clear that the primary obstacle to access is the cost of health care. Therefore, we should give priority to proposals that seek to lower costs, expand choice, and increase competition.
- Finally, we must begin by getting our own house in order. Annual state spending on health care has risen from \$2.7 billion in 2000 (22 percent of the budget) to \$4.5 billion in 2006 (28 percent of the budget). Each year, we’re diverting \$750 million more away from education, infrastructure and public safety toward health care costs. If we don’t alter our course, health care spending will eat our budget alive. We must also spend wisely. The state is involved in purchasing or providing health care for one

in every four people in our state (including K-12 employees), yet a recent audit showed that Medicaid (again) made millions of dollars of questionable expenditures. It's no wonder Washington leads the nine western states in per capita spending on Medicaid and state employee benefits. I agree with the Washington Roundtable's Steve Mullen when he said in March 2005 that getting our health care spending in line with other states would save us up to \$1.28 billion a year and help us fund other priority programs.

Now is the time for bold solutions, not vague government ideas that sound good but have little impact. It's time to ask the tough questions: When it comes time for Basic Health Plan enrollees to transition off the plan, why aren't there affordable private sector products available to them? Why don't we get a handle on emergency room use? Why can't you get an answer when asking about the price of the medical appointment when you walk out the door? We must also call on consumers to be part of the solution. As health care users, we may need to reorient our expectations of what insurance is all about. We've grown dependent on "first dollar" coverage, but affordable, creative solutions may lead us in other directions. Being open to those ideas will be key as we move forward.

The Health Care Commission faces a challenging task. I believe that if we begin our discussion with a sound foundation, we can go a long way toward reaching our goal of increased, affordable access to health care for all Washingtonians.

### **Recent meetings, events**

Even though it's "interim," my schedule continues to be busy with meetings and other events. Here is a look at meetings I've attended since June: Methow Valley Irrigation District/Department of Ecology meeting; meeting with Kim Herman, executive director of the Washington State Housing Finance Commission, on affordable housing in tourist areas such as Leavenworth, Chelan, and Winthrop; No-See-Um Road Design meeting in Chelan; Washington Policy Center Conference meeting in Sea-Tac; Blue Ribbon Health Care Commission meeting in Sea-Tac; Rural Health Care Tour in Eastern Washington; Washington Department of Fish and Wildlife commissioners meeting in Wenatchee/Tour of Beebe Springs site; Keynote speaker at Girls State in Ellensburg; Chronic Care Management meeting in Sea-Tac; Long Term Care Task Force meeting in Sea-Tac; KPQ interview with Rhona Barron; LEOFF2 Board meeting in Olympia (I participated via phone); Blue Ribbon Health Care Commission meeting in Olympia; Joint Legislative Audit and Review Committee meeting in Olympia; Mental Health Task Force meeting in Spokane; Beebe Springs meeting in Chelan; Douglas County Sewer District meeting in East Wenatchee. If you want more information on these meetings, feel free to call my district office at 509-663-9702 or e-mail me at [parlette.linda@leg.wa.gov](mailto:parlette.linda@leg.wa.gov).

As always, I appreciate receiving your comments, questions and ideas about issues impacting our region and the state. Let's continue the dialogue. It helps me to better serve you and the 12<sup>th</sup> Legislative District. I'll send out another e-mail update in August. Until then, I hope you enjoy the rest of July!